PTO/SB/01 (12-97)

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## **Attorney Docket Number** AP89US **DECLARATION FOR UTILITY OR** KIA SILVERBROOK First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) ☑ Declaration OR Submitted Group Art Unit with Initial Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
A HANDHELD MOBILE COMMUNICATIONS DEVICE WITH A DETACHABLE PRINTING MECHANISM										
the specification of which  (Title of the Invention)  is attached hereto										
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Fo	oreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached?				
PP7021	Australia	No	ovember 9, 1998	00						
Certified copy not enclosed as this is a Continuation Application of USSN										
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Number(s) Filing Date			M/DD/YYYY)	numbe supple	onal provisiona ers are listed o emental priorit SB/02B attach	on a y data sheet				
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[Page 1 of 2]

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Docket No.: AP89US

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## DECLARATION Utility or Design Patent Application

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)					
							ļ							
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.														
As a named inv	entor, I h	ereby appoint th	e follow	ing register	ed pr	actitioner(	s) to p	rosecut	e this	s application	n and to	transa	act all business	in the Paten
and Trademark	Office of	onnected therew	ith: 🔲	Customer	Num	ber						▶ [	Place Cus Number Ba	
				OR Registered	prac	ctitioner(s)	name	/registra	ation	number lis	ted belo	" L	Label h	
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Additional	registere	d practitioner(s)	named o	on suppleme	ental	Registere	d Prac	titioner	Infor	mation she	et PTO	/SB/020	C attached her	eto
Direct all corr	Direct all correspondence to:  Customer Number or Bar Code Label  24011  OR Correspondence address belo								dress below					
Name	Name Kia Silverbrook													
Address	Silve	rbrook Res	earch	Pty Ltd				_						
Address	393	Darling Stre	eet											
City	Balm	nain				s	tate	N:	sw	ZIP	204	1		
Country	Aust	ralia		Telep	hon	ıе 61-2	<u>-981</u>	8-663	33		Fax	61-	1-2-9818-6711	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of S	Name of Sole or First Inventor:													
Given Name (first and middle [if any])						Family Name or Surname								
KIA							SILVERBROOK							
Inventor's Signature		lul					Aug 29, Date 2003							
Residence: 0	City	Balmain State NSW			NSW		Country Australia Citizenship Australia					Australian		
Post Office A	ice Address 393 Darling Street													
Post Office Address														
City		Balmain	State	NSW		ZIP	. 2	2041			Cour	ntry	Australi	ia
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto														

## AP89US

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## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet
Page 1\_\_ of \_\_1

Name of Additional Joint Inventor, if ar	ıy:	A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]	Family Name or Surname							
TOBIN ALLEN	KING							
Inventor's Signature			Date August 29, 2003					
Residence: City Balmain	State NSW		Country Australia		Citizenship Australian			
Mailing Address 393 Darling Street								
Mailing Address								
City Balmain				Country Australia				
Name of Additional Joint Inventor, if any:   A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]	)	Family Name or Surname						
Inventor' s Signature		Date						
Residence: City State			Country Citizenship					
Mailing Address								
Mailing Address								
City State			ZIP	Cor	untry			
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature Date								
Residence: City State			Country	Citizenship				
Mailing Address								
Mailing Address								
City State			ZIP	С	ountry			

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